

## BOARD FOR PROFESSIONAL ENGINEERS AND LAND SURVEYORS

Mailing Address: Post Office Box 349002, Sacramento, CA 95834-9002 2535 Capitol Oaks Drive, Suite 300, Sacramento, CA 95833-2944 Telephone: (916) 263-2222 CALNET: 8-435-2222



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## **ADDRESS CHANGE AFFIDAVIT**

I,, declare under penalty of perjury tha (Name)						
(Nam	ne)		·			
following declaration is tr	ue and corre	ct:				
I have changed m	y address for	r all intents and	I purposes <b>from</b> :			
(Street)			(City)	(State) (ZIP)		
to:						
(Street)			(City)	(State) (ZIP)		
e-mail address (optional)						
	(s) and expire	, ,	r each license/registratio	n you hold:		
Field of License or Registration	Number	Expiration Date	Field of License or Registration	Number	Expiration Date	
EIT/LSIT		n/a	Land Surveyor			
Agricultural			Manufacturing			
Chemical			Mechanical			
Civil			Metallurgical			
Control Systems			Nuclear			
Corrosion			Petroleum			
Electrical			Quality			
Fire Protection			Safety			
Geotechnical			Structural			
Industrial			Traffic			
Date change is effective:		[	Daytime Telephone (optiona To confirm ac	al) ddress only. Not a pa	rt of Board records.	
Signature) (Date Signed)			ed)(Social	(Social Security Number)		

California Code of Regulations, Title 16, Section 412, requires: "Within thirty (30) days after changing addresses, he/she shall notify the board office of such change."

**Note:** Filing an Organization Record does not relieve an individual from the responsibility of filing this form.

(Rev. 3/00)